PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

031252

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)		7	TYPE		OR		
			-					RATE	FEE	4	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		*			X\$ 9=		OR	X\$18=	
	DEPENDENT C			inus 3 =				X43=		OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* 1	the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)	,	(Colun		(Column 3)	, _	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	finus *** TIPLE DEPENDENT		=] [X43=		OR	X86=	
_	FINOT PRESE	INTATION OF IM	JETIPLE DEI	PENDENT	CLAIM		¹ [+145=		OR	+290=	
								TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE			ADDIT. FEE	
8	-	CLAIMS REMAINING		HIGHE	ST		1 г		ADDI-	1		ADDI-
AMENDMENT		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=			+290=	
								TOTAL		OR	TOTAL	
	·									OR ,	ODIT. FEE	
	<u> </u>	(Column 1) CLAIMS		(Colum		(Column 3)				_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X43=			X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	V00=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									·	OR A	TOTAL DDIT. FEE	
i	he *Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the l	ns, enter s. highest number	r foun	d in the appr	opriate box	in colu	mn 1.	